## Case 16-19952 Doc 1 Filed 06/17/16 Entered 06/17/16 16:01:44 Desc Main Document Page 1 of 72

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

## Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
) F E I	Write the name that is on	Earlene	
	your government-issued picture identification (for example, your driver's	First name	First name
	license or passport).	Middle name	Middle name
	Bring your picture	Bibbs-Hayden	
	identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years	FKA Earlene Hughes	
	Include your married or maiden names.	FKA Earlene Lee	
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-4593	

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Case number (if known)

Debtor 1 Earlene Bibbs-Hayden

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
<ol> <li>Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years</li> </ol>		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live	12 W 140th Ct.	If Debtor 2 lives at a different address:			
		Riverdale, IL 60827  Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Cook				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Debtor 1 Earlene Bibbs-Hayden

Case number (if known)

Part	Tell the Court About	our E	Bankruptcy Ca	se						
7.	The chapter of the Bankruptcy Code you are			rief description of each, see go to the top of page 1 and			.C. § 342(b) for Individu	uals Filing for Bankruptcy		
	choosing to file under	■ Chapter 7								
		□ Chapter 11								
			Chapter 12							
			Chapter 13							
			·							
8.	How you will pay the fee		about how yo	entire fee when I file my p u may pay. Typically, if you a attorney is submitting your p address.	are paying	the fee yourself,	you may pay with cash	, cashier's check, or money		
			I need to pay	the fee in installments. If		e this option, sign	and attach the Applica	ation for Individuals to Pay		
		_	Ū	e in Installments (Official Fo	,	this antion only i	f you are filing for Chan	stor 7. By low, a judgo may		
			but is not req	t my fee be waived (You muired to, waive your fee, and	may do so	only if your inco	me is less than 150% of	of the official poverty line that		
			applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition.							
						(		,		
9.	Have you filed for bankruptcy within the last 8 years?	□ N ■ Y								
	-			Northern District of						
			Diatriat	Illinois, ch13,	\//l= = =	1/29/13	Cana awah sa	13-03393		
			District	dismissed	When	1/29/13	Case number	13-03393		
			District		When		Case number			
			District		When		Case number			
10.	Are any bankruptcy	■ N	lo							
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	ΠY	es.							
			Debtor				Relationship to y	ou		
			District		When		Case number, if	known		
			Debtor				Relationship to y	ou		
			District		When		Case number, if	known		
11.	Do you rent your	■ N	lo. Go to li	ne 12.						
	residence?	ПΥ	es. Has yo	ur landlord obtained an evic	tion judgm	ent against you a	nd do you want to stay	in your residence?		
				No. Go to line 12.						
				Yes. Fill out <i>Initial Statemer</i> bankruptcy petition.	nt About ar	Eviction Judgme	ent Against You (Form	101A) and file it with this		
				-1> 1						

Document Page 4 of 72 Case number (if known) Debtor 1 Earlene Bibbs-Hayden Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time ■ No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of **Bankruptcy Code and are** operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ☐ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any No. property that poses or is

alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

☐ Yes.

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

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Debtor 1 Earlene Bibbs-Hayden

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

## ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credi	t
counseling because of:	

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

## ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 72 Case number (if known) Debtor 1 Earlene Bibbs-Hayden Part 6: **Answer These Questions for Reporting Purposes** Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. you have? individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. □ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses □ No are paid that funds will be available for Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5**0,001-100,000 **5001-10,000** 50-99 owe? **1**0,001-25,000 ☐ More than 100,000 □ 100-199 **200-999** 19. How much do vou **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million □ \$500,001 - \$1 million ☐ More than \$50 billion 20. How much do you □ \$1,000,001 - \$10 million ■ \$0 - \$50.000 □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Earlene Bibbs-Hayden Signature of Debtor 2 Earlene Bibbs-Hayden Signature of Debtor 1

Executed on

MM / DD / YYYY

Executed on

June 17, 2016 MM / DD / YYYY Case 16-19952 Doc 1 Filed 06/17/16 Entered 06/17/16 16:01:44 Desc Main Document Page 7 of 72

Debtor 1 Earlene Bibbs-Hayden

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Terrand	ce S. Leeders	Date	June 17, 2016
Signature of	Attorney for Debtor		MM / DD / YYYY
Terrance S	S. Leeders		
Leeders &	Associates		
Firm name			
205 W. Ra	ndolph St.		
Suite 1240			
Chicago, I	L 60606		
	City, State & ZIP Code		
Contact phone	312-346-7400	Email address	tleeders@leederslaw.com
6244638			
Parnumbar 9 Ct	toto		

		Восин	711 1 446 6 61 12		
Fill in this infor	rmation to identify your	case:			
Debtor 1	Earlene Bibbs-Ha	ayden			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)				☐ Check if	this is
				amended	d filing

## Official Form 106Sum

## **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	i <b>ssets</b> of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	69,688.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	43,246.66
	1c. Copy line 63, Total of all property on Schedule A/B	\$	112,934.66
Pa	t 2: Summarize Your Liabilities		
			abilities at you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	114,521.24
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	43,038.31
	Your total liabilities	\$	157,559.55
Pa	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1,196.97
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,701.35
Pa	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sc	hedules.
7.	■ Yes What kind of debt do you have?		

the court with your other schedules.

Official Form 106Sum

Summary of Yo

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

page 1 of 2

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8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14.

1,394.00

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total o	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

		Case 16-:	19952	2 Doc 1	Filed 06		Entered 06/17/1 Page 10 of 72	6 16:01:44	Desc	Main
Filli	n this in	formation to i	dentify	your case and	this filing:					
Debt	tor 1	Earler First Nam		s-Hayden	dle Name		Last Name			
Debt (Spou	tor 2 se, if filing)	First Nam	e	Mid	dle Name		Last Name			
Unite	ed States	s Bankruptcy C	ourt for	the: NORTHE	RN DISTRIC	T OF ILLIN	OIS			
Case	e numbe	r								Check if this is an amended filing
		Form 10								
Sc	hed	ule A/B	: Pr	operty						12/15
inforn Answ Part	nation. If er every	more space is r question. ribe Each Resid	eeded, a	ittach a separate	sheet to this fo	orm. On the	are filing together, both are top of any additional pages n or Have an Interest In			
	No. Go to		jui oi cqi	anabic interest in	any residence	,, building, i	and, or similar property.			
	Yes. Wh	ere is the proper	ry?							
1.1					What is th	ne property	? Check all that apply			
	2314 V	Vindsor Ln			Sin	igle-family ho	ome	Do not deduct se	ecured claims	or exemptions. Put
	Street add	ress, if available, or	other desc	cription	_ □ Du	plex or multi-	-unit building			ms on Schedule D: ecured by Property.
					□ Co	ndominium o	or cooperative			
					☐ Ma	nufactured o	or mobile home	Current value of	fthe Cu	rrent value of the
-	Count	ry Club Hills	IL	60478-0000	_ Lar	nd		entire property?	? po	rtion you own?
	City		State	ZIP Code	☐ Inv	estment prop	perty	\$69,68	38.00	\$69,688.00

☐ Timeshare Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known. □ Other Who has an interest in the property? Check one Fee simple ■ Debtor 1 only Cook Debtor 2 only County Debtor 1 and Debtor 2 only Check if this is community property  $\ \square$  At least one of the debtors and another (see instructions) Other information you wish to add about this item, such as local property identification number: in foreclosure, surrender value from Zillow.com

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here......=>

\$69,688.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

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Deb	tor 1	Earlene Bibb	os-Hayden		Ca	ase number (if known)	
3. <b>C</b>	ars, var	ns, trucks, tract	ors, sport utility ve	hicles, motorcycles			
	No						
	Yes						
3.1	Make	: Nissan		Who has an interest in th	e property? Check one		ured claims or exemptions. Put secured claims on Schedule D:
	Mode	Murano		Debtor 1 only			ve Claims Secured by Property.
	Year:			Debtor 2 only		Current value of t	he Current value of the
		oximate mileage:	58,000	Debtor 1 and Debtor 2	•	entire property?	portion you own?
		information:	1	At least one of the debt	ors and another		
	Lien	held by Chas	se	Check if this is comm (see instructions)	unity property	\$19, <b>500</b>	.00 \$19,500.00
.p Part	ages y	ou have attache	ed for Part 2. Write to	n for all of your entries fithat number hereems			\$19,500.00  Current value of the
6. <b>H</b>	ouseho	old goods and f	urnishings				portion you own? Do not deduct secured claims or exemptions.
	] No	es: Major applian	ces, furniture, linens	, china, kitchenware			
			Miscellaneous I	Household Goods			\$1,400.00
	] No	es: Televisions a	phones, cameras, m	nedia players, games	oment; computers, printe	ers, scanners; music co	ollections; electronic devices
			Miscellaneous e	electronics			\$350.00
E	Example ■ No		figurines; paintings, ons, memorabilia, co		oks, pictures, or other ar	t objects; stamp, coin,	or baseball card collections;
E	ixample ■ No	ent for sports ares: Sports, photo musical instru	graphic, exercise, an	nd other hobby equipment;	bicycles, pool tables, gol	lf clubs, skis; canoes a	and kayaks; carpentry tools;
_	<b>-</b> 1 €3. 1	D000111110					
	Firearm <i>Exampi</i> ■ No		s, shotguns, ammuni	tion, and related equipmen	t		

Dobtor 1	Case 16-1		Filed 06/17/16 Document	Page 12 of 72	6:01:44 ber (if known)	Desc Main
Debtor 1	Earlene Bibb	эs-пауцеп		Case numi	Jei (ii kriowii)	
11. Clothe		othes, furs, leather coa	its, designer wear, shoes	. accessories		
□ No	Describe	, ,	,			
— 103.	Describe	Used Personal C	lothing			\$500.00
		occur croonar o	.cumg			
□ No		welry, costume jewelry	, engagement rings, wed	ding rings, heirloom jewelry, watc	:hes, gems, g	old, silver
		Miscellaneous co	ostume jewelry, rings	, neclaces		\$3,000.00
Examp □ No	rm animals oles: Dogs, cats, I	birds, horses				
		3 dogs				\$0.00
for Pa	art 3. Write that i	number here	from Part 3, including a		attached	\$5,250.00  Current value of the
,	,		,	S		portion you own?  Do not deduct secured claims or exemptions.
■ No	.,	,	your home, in a safe depo	osit box, and on hand when you f	ile your petitio	on
Examp			al accounts; certificates occounts with the same ins	of deposit; shares in credit unions titution, list each.	s, brokerage h	nouses, and other similar
□ No ■ Yes			Institution r	name:		
		17.1. Checking	Checking	account with First Midwes	st	\$2,109.59
		17.2. Savings	Savings a	account with First Midwest		\$837.07
Examp		or publicly traded sto investment accounts v	ocks with brokerage firms, mor	ney market accounts		
■ No □ Yes		Institution or	issuer name:			

Official Form 106A/B Schedule A/B: Property page 3

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Case number (if known) Document

Debtor 1 Earlene Bibbs-Hayden 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ■ No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others □ No Institution name or individual: Yes. ..... Rental deposit \$550.00 Security deposit w/ landlord, no current value to debtor: \$550 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ■ No ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

_		ase 16-199		Doc 1	Filed 06/17/16 Document	Entered 06/17/16 16 Page 14 of 72		Desc Main
De	ebtor 1 <u>Ea</u>	rlene Bibbs-F	layde	n		Case number	∍r (if known)	
	☐ Yes. Give	specific informa	tion					
	Examples: □  No	Ints someone of Inpaid wages, of benefits; unpaid	disabilit loans	y insurance		efits, sick pay, vacation pay, work	ers' compen	sation, Social Security
	Examples: I	insurance poli Health, disability		insurance; l	health savings account (	HSA); credit, homeowner's, or ren	ter's insuran	се
	□ No				P 18 49 1			
	Yes. Nam	e the insurance		ny of each p pany name:	policy and list its value.	Beneficiary:		Surrender or refund value:
			Who	le Life ins	urance -North Caroli	na sister		\$0.00
			Who	le Life Ins	urance -Lincoln	sister		\$0.00
			Who	le Life Ins	urance Physician M	utual sister		\$0.00
	□ No ´	cribe each claim	•	Person attorn	ey Friedman & Solm	& Fall) vs Chicago Arch Dios or, Ltd 200 N LaSalle St. Sui y does not wish to pursue		\$0.00
				attorn	nal Injury suit vs All ey Friedman & Solm go, IL 60601	State (car accident) or, Ltd 200 N LaSalle St. Sui	te 2750	\$15,000.00
	■ No	ngent and unlic		ed claims of	f every nature, includin	g counterclaims of the debtor a	nd rights to	set off claims
	■ No	al assets you d		already list	:			
36			•			ny entries for pages you have at		\$18,496.66
Pai	rt 5: Describe	e Any Business-R	Related	Property You	u Own or Have an Interest	n. List any real estate in Part 1.		
37.	Do you own o	r have any legal	or equit	table interest	in any business-related p	roperty?		
	No. Go to Pa	ırt 6.						
	Yes. Go to li	ne 38.						

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Case number (if known) Earlene Bibbs-Hayden Debtor 1 Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here ..... \$0.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$69,688.00 Part 2: Total vehicles, line 5 \$19,500.00 57. Part 3: Total personal and household items, line 15 \$5,250.00 Part 4: Total financial assets, line 36 \$18,496.66 59. Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 60. \$0.00

\$0.00

Copy personal property total

\$43,246.66

Official Form 106A/B Schedule A/B: Property page 6

Part 7: Total other property not listed, line 54

Total personal property. Add lines 56 through 61...

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$43,246.66

\$112,934.66

		Bodanie	1 440 10 01 12	
Fill in this infor	mation to identify your	case:		
Debtor 1	Earlene Bibbs-Ha	ıyden		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing

# Official Form 106C

# Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemptions are	vou claiming?	Check one only	even if your spo	ouse is filing with you.

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption	
Copy the value from Schedule A/B	Che	ck only one box for each exemption.		
\$19,500.00	<b>\$2,400.00</b>		735 ILCS 5/12-1001(c)	
!		100% of fair market value, up to any applicable statutory limit		
\$1,400.00	•	\$265.34	735 ILCS 5/12-1001(b)	
		100% of fair market value, up to any applicable statutory limit		
\$500.00		\$500.00	735 ILCS 5/12-1001(a)	
		100% of fair market value, up to any applicable statutory limit		
\$3,000.00		\$788.00	735 ILCS 5/12-1001(b)	
		100% of fair market value, up to any applicable statutory limit		
\$2,109.59		\$2,109.59	735 ILCS 5/12-1001(b)	
		100% of fair market value, up to any applicable statutory limit		
	\$19,500.00 \$19,500.00 \$19,500.00	\$19,500.00	\$19,500.00  \$19,500.00  \$1,400.00  \$1,400.00  \$2,400.00  \$2,400.00  \$2,400.00  \$2,400.00  \$2,400.00  \$2,400.00  \$2,400.00  \$2,65.34  \$3,000.00  \$500.00  \$500.00  \$500.00  \$100% of fair market value, up to any applicable statutory limit  \$3,000.00  \$788.00  \$1,00% of fair market value, up to any applicable statutory limit  \$3,000.00  \$788.00  \$2,109.59  \$2,109.59	

Case 16-19952 Doc 1 Filed 06/17/16 Entered 06/17/16 16:01:44 Desc Main Document Page 17 of 72 Earlene Bibbs-Hayden Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Savings: Savings account with First 735 ILCS 5/12-1001(b) \$837.07 \$837.07 **Midwest** Line from Schedule A/B: 17.2 100% of fair market value, up to any applicable statutory limit Personal Injury suit vs All State (car 735 ILCS 5/12-1001(h)(4) \$15,000.00 \$15,000.00 accident) attorney Friedman & Solmor, Ltd 200 100% of fair market value, up to N LaSalle St. Suite 2750 Chicago, IL any applicable statutory limit 60601 Line from Schedule A/B: 33.2 (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

3.	Are you claiming a homestead exemption of more than \$160,375
	(0 1: !:

- Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

  - Yes

		Document P	age 18	of 72	_	
Fill in this informat	ion to identify you	ur case:				
Debtor 1	Earlene Bibbs-l	Hayden				
	First Name	Middle Name Las	st Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name La:	st Name		-	
United States Bankr	untoy Court for the	: NORTHERN DISTRICT OF ILLINO	NS			
Officed States Bariki	upicy Court for the	NORTHERN DISTRICT OF IELINO	113		-	
Case number						
(if known)						if this is an led filing
						ica ming
Official Form	<u>106D</u>					
Schedule D	: Creditors	Who Have Claims Se	cured	by Property	У	12/15
Re as complete and a	curate as nossible	If two married people are filing together, b	oth are equ:	ally responsible for su	innlying correct informs	tion If more snace
is needed, copy the Ad		out, number the entries, and attach it to th				
number (if known). 1. Do any creditors ha	ve claims secured by	v vour property?				
	•	his form to the court with your other sch	edules You	ı have nothing else t	o report on this form	
_	of the information	•	caales. Too	Thave nothing clac t	o report on this form.	
		below.				
	ecured Claims			Column A	Column B	Column C
		more than one secured claim, list the creditor a particular claim, list the other creditors in F		Amount of claim	Value of collateral	Unsecured
much as possible, list t	he claims in alphabeti	ical order according to the creditor's name.		Do not deduct the value of collateral.	that supports this claim	portion If any
2.1 Chase Auto	Finance	Describe the property that secures the c	:laim:	\$20,373.00	\$19,500.00	\$873.00
Creditor's Name	-1	2012 Nissan Murano 58,000 mile	es			
National Bar Dept	nkruptcy	Lien held by Chase				
201 N Centra	al Ave Ms	As of the date you file, the claim is: Checapply.	k all that			
Az1-1191	05004	☐ Contingent				
Phoenix, AZ  Number, Street, Cit		☐ Unliquidated				
Number, Street, Cit	y, State & Zip Code	☐ Disputed				
Who owes the debt?	? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		☐ An agreement you made (such as morto	gage or secui	red		
Debtor 2 only	Oh.	car loan)	:-!- !:			
Debtor 1 and Debto	•	☐ Statutory lien (such as tax lien, mechan) ☐ Judgment lien from a lawsuit	ic's lien)			
At least one of the o		<u> </u>	rchase Mo	oney Security		
community debt		- Other (including a right to onset)				
	Opened					
	09/15 Last					
Data dahta ina	Active	Local delimites of account mountain	6153			
Date debt was incurre	ed 5/25/16	Last 4 digits of account number	0133			
Country Clu	b Hills Water					
Dept	o i illo viator	Describe the property that secures the c	:laim:	\$4,064.24	\$69,688.00	\$4,064.24
Creditor's Name	_	2314 Windsor Ln Country Club	Hills,			
		IL 60478 Cook County in foreclosure, surrender				
4200 183rd \$	St	value from Zillow.com				
Country Clu		As of the date you file, the claim is: Chec apply.	k all that			
60478		Contingent				
Number, Street, Cit	y, State & Zip Code	Unliquidated				
Who owes the debt?	? Check one	☐ Disputed  Nature of lien. Check all that apply.				
■ Debtor 1 only	Shook one.	An agreement you made (such as morte	dage or secu	red		
Debtor 2 only		car loan)	Jg. 5. 55501			
Debtor 1 and Debto	or 2 only	☐ Statutory lien (such as tax lien, mechan	ic's lien)			

Official Form 106D

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Debtor 1 Earlene Bibbs-Hayden First Name Middle N	ame Last Name	Case number (if know)		
$\square$ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)  Water lien			
Date debt was incurred 2016	Last 4 digits of account number 0004			
Provincetown				
2.3   Improvement *	Describe the property that secures the claim:	\$652.00	\$69,688.00	\$652.00
Creditor's Name	2314 Windsor Ln Country Club Hills,			
	IL 60478 Cook County			
4000 PROVINCETOWN	in foreclosure, surrender value from Zillow.com			
DRIVE	As of the date you file, the claim is: Check all that			
Country Club Hills, IL 60478	apply.			
Number, Street, City, State & Zip Code	Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated ☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only	☐ An agreement you made (such as mortgage or se	cured		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset) Condo Ass	sociation Assessmen	its	
Date debt was incurred 2016	Last 4 digits of account number 4593			
2.4 Rogers & Hollands	Describe the property that secures the claim:	\$2,212.00	\$3,000.00	\$0.00
Creditor's Name	Miscellaneous costume jewelry,			
	rings, neclaces			
405.0 1 0 11 //0040	As of the date you file, the claim is: Check all that			
135 S. LaSalle #8019 Chicago, IL 60674	apply.			
Number, Street, City, State & Zip Code	Contingent			
Number, Street, Oity, State & Zip Code	☐ Unliquidated ☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only	☐ An agreement you made (such as mortgage or se	cured		
Debtor 2 only	car loan)			
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
$\square$ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a	Other (including a right to offset)	Money Security		
community debt				
Date debt was incurred 2006	Last 4 digits of account number 1225			
2.5 Wells Fargo Home		Ac= 225 55	<b>A</b> 00 000 00	<b>A4= =</b>
Mortgage	Describe the property that secures the claim:	\$87,220.00	\$69,688.00	\$17,532.00
Creditor's Name	2314 Windsor Ln Country Club Hills,			
	IL 60478 Cook County in foreclosure, surrender			
1100 East Woodfield	value from Zillow.com			
Road Suite 430				
	As of the date you file, the claim is: Check all that			
Schaulibura. IF 60.173	apply.			
Schaumburg, IL 60173  Number, Street, City, State & Zip Code	apply. ☐ Contingent			
Number, Street, City, State & Zip Code	apply. ☐ Contingent ☐ Unliquidated			
	apply. ☐ Contingent			
Number, Street, City, State & Zip Code	apply.  ☐ Contingent ☐ Unliquidated ☐ Disputed	cured		

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

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Debtor 1	Earlene Bibbs-Hayden			Case number (if know)
	First Name	Middle Name	Last Name	<del></del>
☐ At leas	1 and Debtor 2 only t one of the debtors and a if this claim relates to a nunity debt	another 🔲 Judgme	ry lien (such as tax lien, ment lien from a lawsuit ncluding a right to offset)	echanic's lien)  First Mortgage
Date debt	was incurred	Las	t 4 digits of account nun	nber <u>1105</u>
Add the	dollar value of your en	tries in Column A on	this page. Write that nur	mber here: \$114,521.24
	the last page of your fo at number here:	orm, add the dollar va	alue totals from all pages	<sup>s.</sup> \$114,521.24

## Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

F'11 ' 41-'-		Document	Page 2	1 of 72	
FIII IN this	information to identify your	case:			
Debtor 1	Earlene Bibbs-Ha	<del>-</del>			
Dobtor 2	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	g) First Name	Middle Name	Last Name		
United Stat	es Bankruptcy Court for the:	NORTHERN DISTRICT OF IL	LINOIS		
Case numb	per				☐ Check if this is an amended filing
	Form 106E/F lle E/F: Creditors W	/ho Have Unsecured	l Claims		12/15
any executor Schedule G: Schedule D: left. Attach the name and ca	ry contracts or unexpired leases Executory Contracts and Unexp Creditors Who Have Claims Sec	that could result in a claim. Also ired Leases (Official Form 106G). ured by Property. If more space is le. If you have no information to re	list executory of Do not include needed, copy	Part 2 for creditors with NONPRIORIT contracts on Schedule A/B: Property any creditors with partially secured on the Part you need, fill it out, number to not file that Part. On the top of any	(Official Form 106A/B) and on claims that are listed in the entries in the boxes on the
	creditors have priority unsecure				
	Go to Part 2.	u ciainis against you:			
	30 to Part 2.				
☐ Yes.	List All of Your NONPRIORIT	V Unacquired Claims			
_ `	creditors have nonpriority unsection of the control	art. Submit this form to the court with	your other sch	edules.	
Yes.					
unsecur	ed claim, list the creditor separately	y for each claim. For each claim liste	d, identify what	b holds each claim. If a creditor has mo type of claim it is. Do not list claims alrea three nonpriority unsecured claims fill o	ady included in Part 1. If more
					Total claim
4.1 <b>A</b> C	lvocate Health And Hospi orp	tals Last 4 digits of ac	count number	0882,1519,3 334	\$291.54
20	ppriority Creditor's Name 25 Windsor Drive	When was the deb	t incurred?	2015	
Nu	nber Street City State Zlp Code o incurred the debt? Check one.	As of the date you	file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
_	At least one of the debtors and and	T ( NONDRIO	RITY unsecure	d claim:	
	Check if this claim is for a com	По			
del			ing out of a sepa	ration agreement or divorce that you did	d not
	-			g plans, and other similar debts	
	Yes	Other. Specify	•	• •	
_		- Other. Specify		=	

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Debtor 1 Earlene Bibbs-Hayden Case number (if know) 4.2 **Advocate Medical Group** Last 4 digits of account number 4069 \$13.69 Nonpriority Creditor's Name PO Box 92523 When was the debt incurred? 2015 Chicago, IL 60675 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Bills ☐ Yes 4.3 **Advocate South Suburban Hospital** Last 4 digits of account number 0908,3334 \$716.18 Nonpriority Creditor's Name PO BOX 4251 When was the debt incurred? 2015 Carol Stream, IL 60197-4251 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim:  $\square$  At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts  $\Pi$  Yes **Medical Bills** Other. Specify 4.4 American Financial Cre Last 4 digits of account number 9770 \$43.00 Nonpriority Creditor's Name 10333 N Meridian St When was the debt incurred? **Opened 06/11** Ste 270 Indianaoplis, IN 46290 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts **Collection Attorney Wellgroup** Other. Specify Healthpartners ☐ Yes

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Debtor 1 Earlene Bibbs-Hayden Case number (if know) 4.5 ARS Last 4 digits of account number 0000 \$339.00 Nonpriority Creditor's Name 1801 NW 66th Ave When was the debt incurred? 2010 Plantation, FL 33313 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Bills -prarie emergency services ☐ Yes 4.6 AT&T Last 4 digits of account number 4593 \$938.00 Nonpriority Creditor's Name PO Box 8212 When was the debt incurred? 2012 Aurora, IL 60572-8212 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim:  $\square$  At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts  $\Pi$  Yes ■ Other. Specify Utility 4.7 **ATG Credit** Last 4 digits of account number 6071 \$457.00 Nonpriority Creditor's Name P.O. Box 14895 2008 When was the debt incurred? Chicago, IL 60614 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim:  $\square$  At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No **Medical Bills** ☐ Yes Other. Specify MedicalDebt Dr. Krishna Sunkara

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Debtor 1 Earlene Bibbs-Hayden Case number (if know) 4.8 Atg Credit Llc Last 4 digits of account number 3233 \$435.00 Nonpriority Creditor's Name 1700 W Cortland St When was the debt incurred? **Opened 06/10** Ste 2 Chicago, IL 60622 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts **Collection Attorney Women S Wellness** ■ Other. Specify Center ☐ Yes 4.9 **CAB Services** \$726.00 Last 4 digits of account number 2527 Nonpriority Creditor's Name 60 Barney Dr. When was the debt incurred? 2008 Joliet, IL 60434 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No lacktriangledown Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Bills ☐ Yes 4.1 Cda/Pontiac 9700 \$315.00 Last 4 digits of account number Nonpriority Creditor's Name Attn:Bankruptcy When was the debt incurred? **Opened 01/13** Po Box 213 Streator, IL 61364 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans  $\square$  Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No lacksquare Debts to pension or profit-sharing plans, and other similar debts Collection Attorney Foundation Emergency ☐ Yes ■ Other. Specify Services

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Earlene Bibbs-Hayden	Case number (if know)	
City of Chicago EMS	Last 4 digits of account number 7879	\$1,067.00
Nonpriority Creditor's Name 33589 Treasury Ctr	When was the debt incurred? 2016	
Chicago, IL 60694  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	,	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did n report as priority claims	ot
■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Medical Bills	
City of Chicago Heights	Last 4 digits of account number 4593	\$200.00
Nonpriority Creditor's Name	<del></del>	
1601 S. Halsted	When was the debt incurred? 2010	
Chicago Heights, IL 60411  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,	
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	Obligations arising out of a separation agreement or divorce that you did n	ot
Is the claim subject to offset?	report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify tickets	<u> </u>
City of Hazelcrest	Last 4 digits of account number 2527	\$200.00
Nonpriority Creditor's Name 3000 W. 170th Place	When was the debt incurred? 2012	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	Obligations arising out of a separation agreement or divorce that you did n	ot
Is the claim subject to offset?	report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other Specify red light	

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Debtor 1 Earlene Bibbs-Hayden Case number (if know) 4.1 \$140.00 **CMRE Financial Services** 2262 Last 4 digits of account number 4 Nonpriority Creditor's Name 3075 E Imperial Hwy When was the debt incurred? **Opened 11/15** Suite 200 Brea, CA 92821 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No Collection Attorney Radiology Imaging ☐ Yes Other. Specify Consultants 4.1 Codilis & Associates P.C. 5227 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name 15W030 Frontage Rd. When was the debt incurred? 2016 Suite 100 Burr Ridge, IL 60527 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Notice Only** Other. Specify Collect Sys 70N1 \$483.00 Last 4 digits of account number Nonpriority Creditor's Name 8 S. Michigan When was the debt incurred? 2011 Suite 618 Chicago, IL 60603 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Medical Bills** Other. Specify

Document Page 27 of 72  Case number (if know)	
Last 4 digits of account number 4593	\$800.00
When was the debt incurred? 2012	
As of the date you file, the claim is: Check all that apply	
☐ Contingent	
☐ Disputed  Type of NONPRIORITY unsecured claim:	
Obligations arising out of a separation agreement or divorce that you did no report as priority claims	pt
$\square$ Debts to pension or profit-sharing plans, and other similar debts	
Other. Specify Utility	
Last 4 digits of account number 4593	\$500.00
When was the debt incurred? 2015-16	_
As of the date you file, the claim is: Check all that apply	
☐ Contingent	
☐ Unliquidated	
☐ Disputed	
Type of NONPRIORITY unsecured claim:	
☐ Student loans	
$\square$ Obligations arising out of a separation agreement or divorce that you did no report as priority claims	pt
$\square$ Debts to pension or profit-sharing plans, and other similar debts	
Other. Specify tickets, municipal fine	
Last 4 digits of account number 4593	\$220.00
When was the debt incurred? 2012	_
As of the date you file, the claim is: Check all that apply	
☐ Contingent	
☐ Unliquidated	
☐ Disputed	
Type of NONPRIORITY unsecured claim:	
☐ Student loans	
$\square$ Obligations arising out of a separation agreement or divorce that you did no report as priority claims	yt .
$\square$ Debts to pension or profit-sharing plans, and other similar debts	
Collection Comcast Chicago Seconds -  4000  Collection Comcast Chicago Seconds -	
	Last 4 digits of account number 4593  When was the debt incurred? 2012  As of the date you file, the claim is: Check all that apply  Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Other. Specify Utility  Last 4 digits of account number 4593 When was the debt incurred? 2015-16  As of the date you file, the claim is: Check all that apply  Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Other. Specify tickets, municipal fine  Last 4 digits of account number 4593 When was the debt incurred? 2012  As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims

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Case number (if know)

Den	Earlette Bibbs-naydett		Case number (ii know)	
4.2 0	Dish Network	Last 4 digits of account number	4593	\$500.00
	Nonpriority Creditor's Name  Dept. 0063	When was the debt incurred?	2012	
	Palatine, IL 60055  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	_	П -		
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed	1 alata.	
	At least one of the debtors and another	Type of NONPRIORITY unsecured  ☐ Student loans	a claim:	
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	Obligations arising out of a sepa	ration agreement or divorce that you did not	
	No	report as priority claims  Debts to pension or profit-sharin	a plane, and other similar debts	
	■ No □ Yes	Other. Specify Utility	g pians, and other similar debts	
4.2 1	Diversified Collection Services, In	Last 4 digits of account number	4138,2833	\$775.00
	Nonpriority Creditor's Name P.O. Box 2018	When was the debt incurred?	2007-08	
	Castro Valley, CA 94546  Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	,		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Collection		
4.2	]			
2	Enhanced Recovery Company	Last 4 digits of account number	9962	\$558.00
	Nonpriority Creditor's Name 8014 Bayberry Rd Jacksonville, FL 32256-7412	When was the debt incurred?	10	
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	□ Debts to pension or profit-sharing plans, and other similar debts		
	☐ Yes		on account Sprint	
	03	- Other, Specify	op:	

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Jepto	Earlene Bibbs-Hayden		Case number (if know)	
.2	Global Vacations	Last 4 digits of account number	4593	\$0.00
	Nonpriority Creditor's Name 6200 Metrowest Blvd	When was the debt incurred?	2010	
	Orlando, FL 32835  Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
	Who incurred the debt? Check one.	•	,	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Notice Only	<i>y</i>	
.2	Harris & Harris Ltd	Last 4 digits of account number	8998	\$0.00
	Nonpriority Creditor's Name 111 W Jackson Blvd Ste 400 Chicago, IL 60604-4134	When was the debt incurred?	2016	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims		
	No	$\square$ Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify Notice Only	<u>/</u>	
.2			Medical	4500.00
	Health Care delivery systems	Last 4 digits of account number	Bills	\$530.00
	Nonpriority Creditor's Name 1890 Silver Cross Blvd, Ste 320 New Lenox, IL 60451	When was the debt incurred?	2010-12	
	Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	on plans, and other similar debts	
	■ NO  Ves	Other Cresify Medical Bill		
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Other Cresity IVIE(III:31 BII	15	

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Debtor 1 Earlene Bibbs-Hayden Case number (if know) 4.2 8001 \$35.00 IC System Last 4 digits of account number 6 Nonpriority Creditor's Name 444 Highway 96 East Opened 4/01/12 Last Active PO Box 64886 When was the debt incurred? 10/01/11 Saint Paul, MN 55164-0086 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection At T Midwest ☐ Yes 1350,1330,1 4.2 **Illinois Collection Service Agency** \$18.991.00 Last 4 digits of account number 432,1049 Nonpriority Creditor's Name PO Box 1010 When was the debt incurred? 8/4/2008 Tinley Park, IL 60477 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Medical Bills** Other. Specify 4.2 6929 \$90.00 **Illinois Collection Service Agency** Last 4 digits of account number 8 Nonpriority Creditor's Name PO Box 1010 When was the debt incurred? 2007 Tinley Park, IL 60477 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Medical Bills Collection Midwest Physician ☐ Yes Other. Specify Group Ltd.

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Debtor 1 Earlene Bibbs-Hayden Case number (if know) Illinois Housing Development 42 4593 \$0.00 9 Last 4 digits of account number Author Nonpriority Creditor's Name 401 N. Michigan Ave #700 When was the debt incurred? 2016 attn Legal Dept. Chicago, IL 60611 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Notice Only ☐ Yes 4.3 4593 \$600.00 Illinois Tollway Last 4 digits of account number 0 Nonpriority Creditor's Name **ATTN: Violation Administration** When was the debt incurred? 2008 Cent 2700 Ogden Ave. **Downers Grove, IL 60515** Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify tollway 4.3 Jeffrey L. Rosen & Associates 4593 \$24.00 Last 4 digits of account number Nonpriority Creditor's Name 541 Otis Brown Drive When was the debt incurred? 2010 Munster, IN 46321 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection ☐ Yes

tor 1 Earlene Bibbs-Hayden	——————————————————————————————————————	Case number (if know)	
Law Office of Neil J Greene	Last 4 digits of account number	7400,7495	\$0.00
Nonpriority Creditor's Name 250 Parkway Drive Suite 160 Lincolnshire, IL 60069	When was the debt incurred?	2016	
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
	<u> </u>		
☐ Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecure	d claim:	
☐ At least one of the debtors and another	Student loans	d Claim.	
☐ Check if this claim is for a community debt  Is the claim subject to offset?		aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharir	ng plans, and other similar debts	
☐ Yes	Other Specify Notice Onl	= :	
Loyola University Medical Center	Last 4 digits of account number	4593	\$47.00
Nonpriority Creditor's Name	When we the debt in some do	2014	
PO Box 3266 Milwaukee, WI 53201	When was the debt incurred?	2011	
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	☐ Debts to pension or profit-sharir	g plans, and other similar debts	
Yes	Other. Specify Medical Se	rvices	
LVNV Funding	Last 4 digits of account number	5840	\$1,458.00
Nonpriority Creditor's Name POBOX 740281	When was the debt incurred?	2009	
Houston, TX 77274			
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
_			
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecure	d claim:	
At least one of the debtors and another	Student loans	u Claiiii.	
☐ Check if this claim is for a community debt  Is the claim subject to offset?		aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharir	og plans, and other similar debts	
. 10	The second secon	O	

☐ Yes

■ Other. Specify FactoringCompany Idt-Hsbc orchard

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Debtor 1 Earlene Bibbs-Hayden Case number (if know) MCSI -Municipal Collection 43 6529 \$473.00 5 Services. Inc Last 4 digits of account number Nonpriority Creditor's Name 7330 College Dr When was the debt incurred? Suite 108 Palo Heights, IL 60463 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify 01 City Of Country Club Hills Amb ☐ Yes **MCSI - Municipal Collection** 4.3 1561 \$200.00 6 Last 4 digits of account number Services, Inc Nonpriority Creditor's Name When was the debt incurred? 7330 College Dr Suite 108 Palo Heights, IL 60463 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify 01 City Of Chicago Heights Ss ☐ Yes 4.3 Medical Business Bureau 0036 \$52.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 10/31/11 Last Active PO Box 1219 When was the debt incurred? 12/01/12 Park Ridge, IL 60068 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Medical Bills** Other. Specify

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Debi	or 1 Earlene Bibbs-Hayden		Case number (if know)	
4.3 8	Merchants and Med	Last 4 digits of account number	6043	\$461.00
	Nonpriority Creditor's Name 6324 Taylor Drive	When was the debt incurred?	2007	
	Flint, MI 48507  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
		☐ Student loans		
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	_	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other Specify Collection		
4.3 9	Merchants Credit Guide	Last 4 digits of account number	3449	\$55.00
	Nonpriority Creditor's Name	_	On an all 7/04/00 L and Antino	
	223 W. Jackson Chicago, IL 60606	When was the debt incurred?	Opened 7/01/08 Last Active 12/01/08	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Collection	on account	
4.4 0	Mercy Medical Group	Last 4 digits of account number	1689,4593	\$1,180.00
	Nonpriority Creditor's Name 28231 Network PI	When was the debt incurred?	2008-2015	
	Chicago, IL 60673-1282  Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Medical Bil	ls	

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Debi	or 1 <b>Earlene Bibbs-Hayden</b>		Case number (if know)	
4.4 1	Mercy Physician Billing	Last 4 digits of account number	4593	\$228.00
	Nonpriority Creditor's Name 35072 Eagle Way	When was the debt incurred?	2009	
	Chicago, IL 60678-1350  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	<u> </u>	<u> </u>		
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecure	1 claim:	
	☐ At least one of the debtors and another	☐ Student loans	a ordini.	
	☐ Check if this claim is for a community debt  Is the claim subject to offset?		ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other Specify Medical Bil		
4.4 2	Merrick Bank	Last 4 digits of account number	1087	\$1,977.00
	Nonpriority Creditor's Name PO Box 5721 Hicksville, NY 11802-5721	When was the debt incurred?	2003-06	
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.	·	,	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.4	Midland Funding	Last 4 digits of account number	4657	\$1,128.00
<u> </u>	Nonpriority Creditor's Name			,,
	8875 Aero Dr. Ste 200	When was the debt incurred?	1/13	
	San Diego, CA 92123  Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.	•	,	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	☐ Obligations arising out of a sepa		
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing		
	Yes	■ Other. Specify Bank	ompanyAccount Credit One	

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Debt	or 1 Earlene Bibbs-Hayden	Case number (if know)	
1.4 1	Midwest Diagnostic Pathology SC	Last 4 digits of account number 4593	\$273.00
	Nonpriority Creditor's Name 75 Remittance Dr. Ste. 3070 Chicago, IL 60675-3070	When was the debt incurred? 2010	_
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical Bills	_
4.4 5	MRSI	Last 4 digits of account number 4010	\$287.00
	Nonpriority Creditor's Name 2250 E Devon	When was the debt incurred? 2009	_
	#352 Des Plaines, IL 60018  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you file, the claim is. Offect all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical Bills Collection Ingalls Memorial Hospital	_
4.4 6	Municipal Collection Service	Last 4 digits of account number 7459	\$407.00
	Nonpriority Creditor's Name PO Box 666 Lansing, IL 60438	When was the debt incurred? 2009	_
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical Bills	
		1 /	

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1 Earlene Bibbs-Hayden	Case number (if know)	
Northwestern Medicine	Last 4 digits of account number 4488	\$32.90
Nonpriority Creditor's Name 28155 Network PI	When was the debt incurred? 2016	
Chicago, IL 60673-1281	2010	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Medical Bills	
Northwestern Memorial Hospital	Last 4 digits of account number 4905,2771	\$2,639.00
Nonpriority Creditor's Name	When we the debt in some to	
251 E Huron Chicago, IL 60611-2908	When was the debt incurred? 2016	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
■ No □ Yes	Other. Specify  Medical Bills	
	- Otter. Specify	
Oak Lawn Radiology Imaging Consult	Last 4 digits of account number 4593	\$36.00
Nonpriority Creditor's Name		
37241 Eagle Way	When was the debt incurred? 2010	
Chicago, IL 60678-1372 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	□ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Medical Bills	
<del>-</del> . • • •	— Other, Specify	

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Debtor 1 Earlene Bibbs-Hayden Case number (if know) Professional Account Management, 45 4922 \$316.00 0 Last 4 digits of account number Nonpriority Creditor's Name **Collection Services Division** Opened 1/07/08 Last Active When was the debt incurred? P.O. Box 391 3/01/08 Milwaukee, WI 53201-0391 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection Tcf Bank ☐ Yes 4.5 4593 \$46.00 Radiological Physicians LTD Last 4 digits of account number Nonpriority Creditor's Name PO Box 2150 When was the debt incurred? 2010 Bedford Park, IL 60499 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim:  $\square$  At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Medical Bills** Other. Specify 4.5 \$150.00 **Rdk Collection Service** 7478 Last 4 digits of account number Nonpriority Creditor's Name Opened 5/30/08 Last Active 318 John R Rd # 321 When was the debt incurred? 1/01/13 Troy, MI 48083 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection A A A Bail Bonds ☐ Yes

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Case number (if know)

Denio	Larielle Bibbs-nayuell		Case Hulliber (II know)					
4.5	regional recovery associates	Last 4 digits of account number	1425	\$1,253.00				
	Nonpriority Creditor's Name		Opened 3/01/11 Last Active					
	5252 Hohman Po Box 8000 Hammond, IN 46325	When was the debt incurred?						
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply					
	Who incurred the debt? Check one.							
	■ Debtor 1 only	☐ Contingent						
	☐ Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts					
	Yes	Other. Specify Collection	on account -medical					
4.5	Stellar Recovery	Last 4 digits of account number	1435	\$275.00				
	Nonpriority Creditor's Name 1327 Highway 2 W Suite 100	When was the debt incurred?	Opened 4/02/12 Last Active 9/01/12					
	Kalispell, MT 59901	when was the dept incurred?	9/01/12					
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply					
	Who incurred the debt? Check one.	incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not					
	No	Debts to pension or profit-sharin	g plans, and other similar debts					
	Yes	Other. Specify Collection	on account Comcast					
4.5	Tressler Corporate Services	Last 4 digits of account number	4593	\$0.00				
	Nonpriority Creditor's Name 305 W Briarcliff Rd. #201 Bolingbrook, IL 60440	When was the debt incurred?	2016					
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply					
	Who incurred the debt? Check one.							
	■ Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts					
	Yes	Other. Specify Notice Only	<i>'</i>					

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Universal Radiology	Last 4 digits of account number 4593	\$77.0
Nonpriority Creditor's Name	<del></del>	
9410 Compubill Drive	When was the debt incurred? 2010	_
Orland Park, IL 60462		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Medical Bills	

#### Part 3: List Others to Be Notified About a Debt That You Already Listed

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
	01	On the other con-	01	Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 43,038.31
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 43,038.31

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Fill in this infor	rmation to identify your	case:		
Debtor 1	Earlene Bibbs-Ha	nyden		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

### Official Form 106G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company wit Name, Numb	h whom you have the o	contract or lease	State what the contract or lease is for
2.1					
	Name				
					<u> </u>
	Number	Street			
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			
					_
	City		State	ZIP Code	
2.3					
	Name				
	Number	Street			<u>—</u>
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			_
	Nullibei	Street			
	City		State	ZIP Code	_
2.5					
	Name				<u>—</u>
	Number	Street			<u> </u>
	City		State	ZIP Code	_
	•				

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Fill in this ir	nformation to identify your					
Debtor 1	Earlene Bibbs-Ha	vden				
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
United States	s Bankruptcy Court for the:	NORTHERN DISTRICT (	OF ILLINOIS			
Case numbe	er				☐ Check if this is an amended filing	
	Form 106H I <mark>le H: Your Cod</mark>	ebtors			12/15	5
people are fi ill it out, and our name a	ling together, both are equ	ally responsible for suppl boxes on the left. Attach . Answer every question.	ying correct information the Additional Page to t	n. If more space is nee this page. On the top o	e as possible. If two married eded, copy the Additional Pag of any Additional Pages, write	je,
□ No						
■ Yes						
	n the last 8 years, have you California, Idaho, Louisiana,				tates and territories include	
■ No. G	So to line 3.					
☐ Yes. [	Did your spouse, former spou	ise, or legal equivalent live	with you at the time?			
in line 2	again as a codebtor only i 06D), Schedule E/F (Official	f that person is a guarante	or or cosigner. Make su	ire you have listed the	with you. List the person sho creditor on Schedule D (Offic chedule E/F, or Schedule G to	cial
	olumn 1: Your codebtor me, Number, Street, City, State and ZI	P Code		Column 2: The credit	tor to whom you owe the del	ot
17	eroy Hughes 7 W 140th Ct verdale, IL 60827			■ Schedule D, line □ Schedule E/F, lir □ Schedule G Chase Auto Finan	2.1 ne	

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E:11									
	in this information to identify you	Bibbs-Hayden							
	otor 2 ouse, if filing)				_				
Uni	ted States Bankruptcy Court for	the: NORTHERN DISTRIC	CT OF ILLINOIS						
	se number 		-			Check if this is:  An amended A suppleme 13 income a	nt showing		
0	fficial Form 106I					MM / DD/ Y		owing date.	
S	chedule I: Your Ir	ncome				WINT DD/ T			12/15
sup spo atta	as complete and accurate as possible plying correct information. If use. If you are separated and it is separate sheet to this for the Describe Employment 1:	you are married and not fili your spouse is not filing w m. On the top of any additi	ng jointly, and your s	spouse i de inforr	s living nation a	with you, inclubout your spo	ide informa use. If mor	ation about e space is	your needed,
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-fili	ng spouse	
	If you have more than one job		☐ Employed			☐ Emplo	yed		
	attach a separate page with information about additional employers.	Employment status	■ Not employed			☐ Not er	☐ Not employed		
	Include part-time, seasonal, o	Occupation							
	self-employed work.	Employer's name							
	Occupation may include stude or homemaker, if it applies.	ent Employer's address							
		How long employed t	here?						
Par	t 2: Give Details About	Monthly Income							
	mate monthly income as of thuse unless you are separated.	e date you file this form. If	you have nothing to re	eport for	any line,	write \$0 in the	space. Inclu	ude your noi	n-filing
•	u or your non-filing spouse have e space, attach a separate shee		ombine the information	n for all e	mployer	s for that perso	n on the line	es below. If	you need
					Fo	r Debtor 1	For Debt	tor 2 or g spouse	
2.	List monthly gross wages, s deductions). If not paid month			2.	\$	0.00	\$	N/A	
3.	Estimate and list monthly or	vertime pay.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gross Income. Ac	ld line 2 + line 3.		4.	\$	0.00	\$	N/A	

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Deb	tor 1	Earlene Bibbs-Hayden	=	C	ase number (if kn	own)				
					For Debtor 1		non-	Debtor 2 filing sp	ouse	
	Сор	y line 4 here	4.	,	\$ <b>O</b>	.00	\$		N/A	-
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a.	. :	\$ 0	.00	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b.			.00	\$		N/A	
	5c.	Voluntary contributions for retirement plans	5c.			.00	\$		N/A	-
	5d.	Required repayments of retirement fund loans	5d.			.00	\$		N/A	-
	5e.	Insurance	5e. 5f.		. — —	.00	\$ \$		N/A	
	5f. 5g.	Domestic support obligations Union dues	51. 5g.		·	0.00	\$		N/A N/A	-
	5g. 5h.	Other deductions. Specify:	5g. 5h.		:	.00	· T —		N/A	
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.	q		.00	\$		N/A	
		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	9			\$		N/A	
7.			7.	4		.00	<b>э</b>		N/A	-
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total								
		monthly net income.	8a.			.00	\$		N/A	
	8b.	Interest and dividends	8b.	. ;	\$ <b>O</b>	.00	\$		N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	. ;	\$ <b>0</b>	0.00	\$		N/A	
	8d.	Unemployment compensation	8d.		·	.00	\$		N/A	
	8e.	Social Security	8e.	. ;	932		\$		N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify: widow's social security	8f.	;	\$70	0.00	\$		N/A	
		food stamps		9	\$ <b>19</b> 4	.00	\$		N/A	
	8g.	Pension or retirement income	 8g.		:	.00	\$		N/A	
	8h.	Other monthly income. Specify:	8h.			.00	+ \$		N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	1,196	5.97	\$		N/A	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
10	Calc	culate monthly income. Add line 7 + line 9.	10.	\$	1,196.97	+ \$		N/A =	= \$	1,196.97
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ	1,190.97	Τ Ψ-		-14/4	- * —	1,130.31
11.	Stat Inclu	e all other regular contributions to the expenses that you list in Schedule ide contributions from an unmarried partner, members of your household, your riferends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not a	depe					chedule . 11.		0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies						12.	\$	1,196.97
13.	Do y	vou expect an increase or decrease within the year after you file this form	?						Combir monthly	ned y income
		Yes. Explain: Rental income is ending as of June 2016								

Schedule I: Your Income

page 2

Official Form 106I

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Fill	in this information to identify your case	:				
	Earlene Bibbs-Hay	den			eck if this is: An amended filing	
	ouse, if filing)				A supplement show 13 expenses as of	wing postpetition chapter the following date:
Unit	ted States Bankruptcy Court for the: NOR	THERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY	
1	nown)	_				
	fficial Form 106J					
	chedule J: Your Expe					12/15
info	as complete and accurate as possib ormation. If more space is needed, a mber (if known). Answer every quest	ttach another sheet to this				
Pari	t 1: Describe Your Household Is this a joint case?					
1.	No. Go to line 2.  Yes. Does Debtor 2 live in a sep	arate household?				
	☐ No ☐ Yes. Debtor 2 must file Of		for Separate House	ehold of Deb	otor 2.	
2.	Do you have dependents? ■ No					
	Do not list Debtor 1 and Pettor 2.	S. Fill out this information for each dependent	Dependent's relating Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state the dependents names.					□ No □ Yes
	dopondomo namos.					□ No
						☐ Yes ☐ No
						☐ Yes
						□ No
3.	Do your expenses include	_			_	☐ Yes
5.	expenses of people other than	■ No □ Yes				
Est	t 2: Estimate Your Ongoing Mon imate your expenses as of your ban benses as of a date after the bankrup plicable date.	kruptcy filing date unless y				
the	lude expenses paid for with non-cas value of such assistance and have ficial Form 106l.)	ch government assistance in included it on <i>Schedule I: Y</i>	f you know 'our Income		Your exp	enses
4.	The rental or home ownership exp payments and any rent for the ground		nclude first mortgag	e 4.	\$	550.00
	If not included in line 4:					
	4a. Real estate taxes			4a.	\$	0.00
	4b. Property, homeowner's, or ren			4b.	·	0.00
	<ul><li>4c. Home maintenance, repair, an</li><li>4d. Homeowner's association or control</li></ul>			4c. 4d.	·	0.00 162.50
5	Additional mortgage payments for		me equity loans	4u. 5.	·	162.50

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ebtor 1	Earlene Bibbs-Hayden	Case num	ber (if known)	
Utilit	ties:			
6a.	Electricity, heat, natural gas	6a.	\$	85.00
6b.	Water, sewer, garbage collection	6b.	\$	158.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.		150.00
6d.	Other. Specify:	6d.	· · · —	0.00
	d and housekeeping supplies	— <sub>7.</sub>	·	200.00
	dcare and children's education costs	8.	\$	0.00
	hing, laundry, and dry cleaning	9.	\$	25.00
		9. 10.		
	onal care products and services		\$	70.00
	ical and dental expenses	11.	\$	0.00
	sportation. Include gas, maintenance, bus or train fare.	12.	\$	50.00
	ot include car payments.	13.	·	
	rtainment, clubs, recreation, newspapers, magazines, and books			20.00
	ritable contributions and religious donations	14.	<b>5</b>	0.00
i. Insu				
	ot include insurance deducted from your pay or included in lines 4 or 20.	150	¢.	04.05
	Life insurance	15a.		91.85
	Health insurance	15b.	·	0.00
	Vehicle insurance	15c.		0.00
	Other insurance. Specify:	15d.	\$	0.00
	es. Do not include taxes deducted from your pay or included in lines 4 or 20.			
Spec	•	16.	\$	0.00
	allment or lease payments:			
	Car payments for Vehicle 1	17a.	*	499.00
	Car payments for Vehicle 2	17b.	\$	0.00
17c.	Other. Specify: safe deposit boc	17c.	\$	40.00
	Other. Specify:	17d.	\$	0.00
3. You	payments of alimony, maintenance, and support that you did not report as			2.22
	acted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	· ·	0.00
Othe	er payments you make to support others who do not live with you.		\$	500.00
Spec	sify: Support for incarcerated son	19.		
	er real property expenses not included in lines 4 or 5 of this form or on Sched	lule I: Yo	our Income.	
20a.	Mortgages on other property	20a.	\$	0.00
20b.	Real estate taxes	20b.	\$	0.00
20c.	Property, homeowner's, or renter's insurance	20c.	\$	0.00
	Maintenance, repair, and upkeep expenses	20d.		0.00
	Homeowner's association or condominium dues	20e.	·	0.00
	er: Specify: petcare	21.	· ·	100.00
. Ouic	petcare		·Ψ	100.00
2. Calc	ulate your monthly expenses			
22a.	Add lines 4 through 21.		\$	2,701.35
22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	<u> </u>
	Add line 22a and 22b. The result is your monthly expenses.		\$	2,701.35
220.	Add the 22d and 22d. The result is your monthly expenses.		Ψ	2,701.33
3. Calc	ulate your monthly net income.			
23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	1,196.97
23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	2,701.35
	•			,
23c.	Subtract your monthly expenses from your monthly income.			
	The result is your monthly net income.	23c.	\$	-1,504.38
	ou expect an increase or decrease in your expenses within the year after you xample, do you expect to finish paying for your car loan within the year or do you expect your r			or decrease because o
modi	ication to the terms of your mortgage?			
	0.			

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Fill in this					
FIII IN THIS	s information to identify your	Case:			
Debtor 1	Earlene Bibbs-Ha				
Dahtano	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fil	ing) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case num	nber				
(if known)					heck if this is an
				ar	mended filing
Official	Form 106Dec				
		ا میں امانین امار	Dahtaria Cak	a dula a	
Decia	aration About a	<u>ın individuai</u>	Deptor S Scr	iedules	12/15
l <b>f</b> 4				at information	
ii two mar	ried people are filing together	r, both are equally respo	nsible for supplying corre	ct information.	
				laking a false statement, conce	
	money or property by fraud in both. 18 U.S.C. §§ 152, 1341, 1		kruptcy case can result in	fines up to \$250,000, or impriso	onment for up to 20
years, or i	Joun. 16 U.S.C. 99 152, 1541, 1	519, and 5571.			
	_				
	Sign Below				
Did y	you pay or agree to pay some	one who is NOT an attor	ney to help you fill out bar	nkruptcy forms?	
_	No				
	No				
	Yes. Name of person			Attach Bankruptcy Petition	
				Declaration, and Signatu	ire (Official Form 119)
	r penalty of perjury, I declare hey are true and correct.	that I have read the sum	mary and schedules filed	with this declaration and	
	•				
	s/ Earlene Bibbs-Hayden		X X	- h.t 0	
	Earlene Bibbs-Hayden Signature of Debtor 1		Signature of De	eptor 2	
3	ngnature of Debior 1				
	Date June 17, 2016		Date		
			<del></del>		

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Fill	in this inform	nation to identify you	r case:			
Dei	otor 1	Earlene Bibbs-H	Middle Name	Last Name		
	otor 2 ouse if, filing)	First Name	Middle Name	Last Name		
		hkruptcy Court for the:	NORTHERN DISTRICT			
Oili	iled States Dai	ikiupicy Court for the.	NORTHERN DISTRICT	OI ILLIIVOIO		
	se number nown)					Check if this is an amended filing
Sta		of Financial		duals Filing for B		4/10
info	rmation. If me		attach a separate sheet to	are filing together, both are this form. On the top of any		
Par	t 1: Give D	etails About Your Ma	rital Status and Where You	u Lived Before		
1.	What is your	current marital statu	s?			
	☐ Married Not marri	ried				
2.	During the la	ıst 3 vears. have vou	lived anywhere other than	where you live now?		
	_	,,,	<b>,</b>			
		t all of the places vou li	ived in the last 3 vears. Do n	ot include where you live now	<i>i</i> .	
	Debtor 1 Pri		Dates Debtor 1 lived there	ŕ		Dates Debtor 2
	2314 Wind Country C	sor Ln lub Hills, IL 60478	From-To: <b>2004-2014</b>	☐ Same as Debtor	I	☐ Same as Debtor 1 From-To:
3. state	■ No □ Yes. Ma	es include Árizona, Ca	lifornia, Idaho, Louisiana, Ne	gal equivalent in a commun evada, New Mexico, Puerto R Official Form 106H).		
4.	Fill in the tota If you are filin	I amount of income you	u received from all jobs and	ng a business during this ye all businesses, including part- ve together, list it only once ur	time activities.	endar years?
	■ No □ Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)

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Case number (if known) Debtor 1 Earlene Bibbs-Hayden

5.	Did y	ou receive an	y other income during	g this y	ear or the two	previous calendar v	years?
----	-------	---------------	-----------------------	----------	----------------	---------------------	--------

Debtor 1

Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

Debtor 2

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

	N	0
--	---	---

Yes. Fill in the details.

Deptor 1		Deptor 2	
Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
Rental income	\$7,200.00		
SSI Benefits	\$6,018.00		
Food Stamps/Link card	\$1,164.00		
Rental income	\$14,400.00		
SSI Benefits	\$12,036.00		
Food Stamps/Link card	\$2,368.00		
Rental income	\$14,400.00		
SSI Benefits	\$12,036.00		
Food Stamps/Link card	\$2,328.00		
	Sources of income Describe below.  Rental income  SSI Benefits  Food Stamps/Link card  Rental income  SSI Benefits  Food Stamps/Link card  Rental income  SSI Benefits  Food Stamps/Link card	Sources of income Describe below.  Rental income  SSI Benefits  Food Stamps/Link card  Rental income  \$14,400.00  SSI Benefits  \$2,368.00  Rental income  \$14,400.00  Food Stamps/Link card  Food Stamps/Link SSI Benefits  \$2,368.00  Food Stamps/Link Card  Rental income  \$14,400.00  SSI Benefits  \$2,368.00  Food Stamps/Link Card  \$2,368.00  Food Stamps/Link SSI Benefits  \$12,036.00	Sources of income Describe below.  Rental income SSI Benefits S6,018.00  Food Stamps/Link card  SSI Benefits S12,036.00  Food Stamps/Link card  Rental income SSI Benefits S12,036.00  Food Stamps/Link s1,400.00  Food Stamps/Link s2,368.00  Food Stamps/Link s2,368.00

### List Certain Payments You Made Before You Filed for Bankruptcy

6.	Are either	Debtor 1's	s or Debto	or 2's debts	s primarily	consumer	debts?
----	------------	------------	------------	--------------	-------------	----------	--------

Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an П No. individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more?

□ No. Go to line 7.

☐ Yes List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

### Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

□ No. Go to line 7.

List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Creditor's Name and Address		Dates of payment	Total amount paid	Amount you still owe	Was this payment for	
Official Form 107	Stater	nent of Financial Affairs for	Individuals Filing for I	Bankruptcy		page 2

<sup>\*</sup> Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

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Case number (if known) Document Debtor 1 Earlene Bibbs-Hayden

Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
City of Chicago Bureau of Parking 121 N La Salle St RM 107 A Chicago, IL 60602	5/23/2016	\$1,200.00	\$0.00	☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors
				Other parking tickets
Within 1 year before you filed for bankrup Insiders include your relatives; any general pof which you are an officer, director, person is a business you operate as a sole proprietor. alimony.	partners; relatives of any gen in control, or owner of 20% of	neral partners; partners or more of their voting	erships of which yo g securities; and a	ou are a general partner; corporation ny managing agent, including one t
□ No				
Yes. List all payments to an insider.				
Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Marvin Day 2314 Windsor Ln Country Club Hills, IL 60478	6/16/16	\$3,500.00	\$0.00	payment to brother in law for support of incarcerated son
		\$500.00	\$0.00	for support of son in priso
Willie Hughes Stateville Penetentary 16830 IL-53 Crest Hill, IL 60403	monthly	<b>\$300.00</b>	<b>ф</b> 0.00	
Stateville Penetentary 16830 IL-53 Crest Hill, IL 60403  Within 1 year before you filed for bankrup insider? Include payments on debts guaranteed or co	otcy, did you make any pay	••••		
Stateville Penetentary 16830 IL-53 Crest Hill, IL 60403  Within 1 year before you filed for bankrup insider? Include payments on debts guaranteed or co	otcy, did you make any pay	ments or transfer a	any property on a	ccount of a debt that benefited a
Stateville Penetentary 16830 IL-53 Crest Hill, IL 60403  Within 1 year before you filed for bankrup insider? Include payments on debts guaranteed or co	otcy, did you make any pay osigned by an insider.	yments or transfer a	iny property on a	ccount of a debt that benefited a
Stateville Penetentary 16830 IL-53 Crest Hill, IL 60403  Within 1 year before you filed for bankrup insider? Include payments on debts guaranteed or color likely and	Dates of payment 6/13/2016	yments or transfer a Total amount paid	any property on a Amount you still owe	ccount of a debt that benefited a  Reason for this payment Include creditor's name for down payment on
Stateville Penetentary 16830 IL-53 Crest Hill, IL 60403  Within 1 year before you filed for bankrup insider? Include payments on debts guaranteed or color likely l	Dates of payment 6/13/2016  Dates of payment 6/13/2016	Total amount paid \$1,300.00	Amount you still owe \$0.00	Reason for this payment Include creditor's name for down payment on vehicle
Stateville Penetentary 16830 IL-53 Crest Hill, IL 60403  Within 1 year before you filed for bankrup insider? Include payments on debts guaranteed or color local No Yes. List all payments to an insider Insider's Name and Address  Charlene Bailey 1570 Kennilworth Calumet City, IL 60409  rt 4: Identify Legal Actions, Repossession Within 1 year before you filed for bankrup List all such matters, including personal injur modifications, and contract disputes.	Dates of payment 6/13/2016  Dates of payment 6/13/2016	Total amount paid \$1,300.00	Amount you still owe \$0.00	Reason for this payment Include creditor's name for down payment on vehicle
Stateville Penetentary 16830 IL-53 Crest Hill, IL 60403  Within 1 year before you filed for bankrup insider? Include payments on debts guaranteed or color looks and looks guaranteed or color looks.  No Yes. List all payments to an insider Insider's Name and Address  Charlene Bailey 1570 Kennilworth Calumet City, IL 60409  rt 4: Identify Legal Actions, Repossession Within 1 year before you filed for bankrup List all such matters, including personal injuring modifications, and contract disputes.  No Yes. Fill in the details.	Dates of payment 6/13/2016  Dates of payment 6/13/2016	Total amount paid \$1,300.00	Amount you still owe \$0.00	Reason for this payment Include creditor's name for down payment on vehicle
Stateville Penetentary 16830 IL-53 Crest Hill, IL 60403  Within 1 year before you filed for bankrup insider? Include payments on debts guaranteed or color local No Yes. List all payments to an insider Insider's Name and Address  Charlene Bailey 1570 Kennilworth Calumet City, IL 60409  rt 4: Identify Legal Actions, Repossession Within 1 year before you filed for bankrup List all such matters, including personal injur modifications, and contract disputes.	Dates of payment 6/13/2016  Dates of payment 6/13/2016	Total amount paid \$1,300.00	Amount you still owe \$0.00	Reason for this payment Include creditor's name for down payment on vehicle
Stateville Penetentary 16830 IL-53 Crest Hill, IL 60403  Within 1 year before you filed for bankrup insider? Include payments on debts guaranteed or color likely l	Dates of payment 6/13/2016  Dates of payment 6/13/2016  Dates of payment Ones, and Foreclosures Ones, were you a party in any cases, small claims action  Nature of the case slip and fall injury	Total amount paid \$1,300.00	Amount you still owe \$0.00	Reason for this payment Include creditor's name for down payment on vehicle
Stateville Penetentary 16830 IL-53 Crest Hill, IL 60403  Within 1 year before you filed for bankrup insider? Include payments on debts guaranteed or color looks are also looks and an insider.  Insider's Name and Address  Charlene Bailey 1570 Kennilworth Calumet City, IL 60409  It 4: Identify Legal Actions, Repossession Within 1 year before you filed for bankrup List all such matters, including personal injur modifications, and contract disputes.  No Yes. Fill in the details.  Case title Case number	Dates of payment 6/13/2016  Dates of payment 6/13/2016  Dates of payment Cons., and Foreclosures Dates of payment Otcy, were you a party in any cases, small claims action	Total amount paid \$1,300.00	Amount you still owe \$0.00	Reason for this payment Include creditor's name for down payment on vehicle

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Debtor 1 Earlene Bibbs-Hayden

	Case title	Nature of the case	Court or agency	Status of the	e case
	•	car accident personal injury case		■ Pending □ On appea □ Conclude	
	Wells FargoBank NA v Debtor 16-CH-005227	foreclosure		■ Pending □ On appea □ Conclude	
10.	Within 1 year before you filed for bankruptcy, Check all that apply and fill in the details below.  No. Go to line 11.	was any of your prope	rty repossessed, foreclosed	, garnished, attached	, seized, or levied?
	Yes. Fill in the information below.				
	Creditor Name and Address	Describe the Property		Date	Value of the property
		Explain what happened			
	1100 East Woodfield Road Suite 430 Schaumburg, IL 60173	2314 Windsor Ln Cot 60478 Cook County in foreclosure, surrei ☐ Property was reposse ☐ Property was foreclose ☐ Property was garnishe ☐ Property was attached	nder ssed. ed. ed.	pending	\$30,000.00
11.	Within 90 days before you filed for bankruptc accounts or refuse to make a payment becau  No Yes. Fill in the details.		uding a bank or financial ins	titution, set off any a	mounts from your
	Creditor Name and Address	Describe the action the	creditor took	Date action was taken	Amount
12.	Within 1 year before you filed for bankruptcy, court-appointed receiver, a custodian, or ano  ■ No □ Yes		rty in the possession of an a	ssignee for the benef	fit of creditors, a
Par	t 5: List Certain Gifts and Contributions				
13.	Within 2 years before you filed for bankruptcy ■ No □ Yes. Fill in the details for each gift.		s with a total value of more th		
	Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift and Address:	Describe the gifts		Dates you gave the gifts	Value
14.	Within 2 years before you filed for bankruptc	/, did you give any gifts	or contributions with a total	I value of more than \$	6600 to any charity?
	No  No  Yes. Fill in the details for each gift or contrib			·	•
	Gifts or contributions to charities that total		contributed	Dates you	Value
	more than \$600 Charity's Name	Describe what you	Contributed	Dates you contributed	value

Address (Number, Street, City, State and ZIP Code)

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Document Page 52 of 72 Debtor 1 Earlene Bibbs-Hayden Case number (if known) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Nο Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. П Yes. Fill in the details. Description and value of any property **Person Who Was Paid** Date payment Amount of transferred or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You Leeders & Associates **Attorney Fees** June 2016 \$1,250.00 205 W. Randolph St. **Suite 1240** Chicago, IL 60606 tleeders@leederslaw.com Money Sharp Credit Counseling, Inc. June 2016 \$10.00 pre-bankruptcy credit counseling 1916 N. Fairfield Ave Suite 200 Chicago, IL 60647 www.moneysharp.org 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details. Person Who Was Paid Description and value of any property Amount of Date payment Address transferred or transfer was payment made 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. Nο

Address

Description and value of

property transferred

Yes. Fill in the details.

Person's relationship to you

**Person Who Received Transfer** 

Date transfer was

made

Describe any property or

paid in exchange

payments received or debts

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Debtor 1 Earlene Bibbs-Hayden

19.	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro No Yes, Fill in the details.		y property to a so	elf-settled trust or similar device o	of which you are a
	Name of trust	Description and v	alue of the prope	erty transferred	Date Transfer was made
Par	t 8: List of Certain Financial Accounts, Ins	struments, Safe Deposit	t Boxes, and Stor	rage Units	
20.	Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, o houses, pension funds, cooperatives, association of the second seco	or other financial accour	nts; certificates o	of deposit; shares in banks, credit	
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accoun instrument	nt or Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 yearsh, or other valuables?	year before you filed for	bankruptcy, any	safe deposit box or other deposi	tory for securities,
	<ul><li>□ No</li><li>■ Yes. Fill in the details.</li></ul>				
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe the contents	Do you still have it?
	First Midwest Bank		je	ewelry	□ No ■ Yes
22.	Have you stored property in a storage unit of	or place other than your	home within 1 ye	ear before you filed for bankruptc	y?
	■ No □ Yes. Fill in the details.				
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		Describe the contents	Do you still have it?
Par	t 9: Identify Property You Hold or Control	for Someone Else			
23.	Do you hold or control any property that so for someone.	meone else owns? Inclu	ude any property	you borrowed from, are storing f	or, or hold in trust
	Yes. Fill in the details.	W/I 1 //		2	v
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe the property	Value

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Debtor 1 Earlene Bibbs-Hayden

Part 10: Give Details About Environmental Information

For	the purpose of Part 10, the following definitions	apply:					
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these substances.	ir, land, soil, surface water, ground	— ·				
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or s		waste, hazardous substance, toxic	substance,			
Rep	ort all notices, releases, and proceedings that yo	ou know about, regardless of when	they occurred.				
24.	Has any governmental unit notified you that you	u may be liable or potentially liable	under or in violation of an environm	ental law?			
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
25.	Have you notified any governmental unit of any  ■ No □ Yes. Fill in the details.	release of hazardous material?					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
26.	Have you been a party in any judicial or adminis  No Yes. Fill in the details.	strative proceeding under any envir	conmental law? Include settlements	and orders.			
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case			
Par	t 11: Give Details About Your Business or Con	nections to Any Business					
27.	Within 4 years before you filed for bankruptcy, o	did you own a business or have any	y of the following connections to an	y business?			
	☐ A sole proprietor or self-employed in a t	trade, profession, or other activity, e	either full-time or part-time				
	☐ A member of a limited liability company	(LLC) or limited liability partnership	p (LLP)				
	☐ A partner in a partnership						

**Business Name Address** 

(Number, Street, City, State and ZIP Code)

☐ An officer, director, or managing executive of a corporation

No. None of the above applies. Go to Part 12.

☐ An owner of at least 5% of the voting or equity securities of a corporation

Yes. Check all that apply above and fill in the details below for each business.

Describe the nature of the business

Name of accountant or bookkeeper

**Employer Identification number** 

Do not include Social Security number or ITIN.

Dates business existed

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Debtor 1 Earlene Bibbs-Hayden

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

N.	-
IN	L

☐ Yes. Fill in the details below.

Name **Date Issued** Address (Number, Street, City, State and ZIP Code)

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Debtor 1 Earlene Bibbs-Hayden

Case number (# known)

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.

18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Earlene Bibbs-Hayden

Earlene Bibbs-Hayden

Signature of Debtor 2

Signature of Debtor 1

Date

June 17, 2016

Date

Date

Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

No

Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this inform	nation to identify your o	ase:		
Debtor 1	Earlene Bibbs-Hay	/den		
Debtor 2	First Name	Middle Name	Last Name	
(Spouse if, filing)	First Name	Middle Name	Last Name	_
United States Bar	nkruptcy Court for the:	NORTHERN DIS	TRICT OF ILLINOIS	_
Case number(if known)				☐ Check if this is an amended filing
Official For		n for Indiv	viduals Filing Under Cha	apter 7 12/15
	vidual filing under chap		ll out this form if:	
You must file this	ver is earlier, unless the	thin 30 days after	oot expired.  you file your bankruptcy petition or by the one time for cause. You must also send copie	
	ople are filing together d date the form.	in a joint case, bo	oth are equally responsible for supplying co	rect information. Both debtors must
•	nd accurate as possibl our name and case num	•	s needed, attach a separate sheet to this for	m. On the top of any additional pages,
Part 1: List Yo	our Creditors Who Have	Secured Claims		
1. For any credito	-	rt 1 of Schedule D	): Creditors Who Have Claims Secured by P	operty (Official Form 106D), fill in the
	ditor and the property th	at is collateral	What do you intend to do with the proper secures a debt?	ty that Did you claim the property as exempt on Schedule C?
Creditor's CI	hase Auto Finance		<ul><li>☐ Surrender the property.</li><li>☐ Retain the property and redeem it.</li></ul>	□ No
Description of property securing debt:	2012 Nissan Muran miles Lien held by Chase	•	<ul><li>■ Retain the property and enter into a Reaffirmation Agreement.</li><li>□ Retain the property and [explain]:</li></ul>	■ Yes
Creditor's Co	ountry Club Hills Wa	ter Dept	■ Surrender the property.	■ No

Description of
Official Form 108

Creditor's

name:

name:

property

Description of

Statement of Intention for Individuals Filing Under Chapter 7

■ Surrender the property.

☐ Retain the property and redeem it.

☐ Retain the property and enter into a

Reaffirmation Agreement.

☐ Retain the property and [explain]:

☐ Retain the property and redeem it.

☐ Retain the property and enter into a

Reaffirmation Agreement.

securing debt: in foreclosure, surrender

2314 Windsor Ln Country Club

2314 Windsor Ln Country Club

Hills, IL 60478 Cook County

Hills, IL 60478 Cook County

value from Zillow.com

**Provincetown Improvement \*** 

☐ Yes

■ No

☐ Yes

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Debtor 1 Earlene Bibbs-Hayden	Case number (if known)		
property in foreclosure, surrender securing debt: value from Zillow.com	☐ Retain the property and [explain]:		
Creditor's Rogers & Hollands name:	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No	
Description of property securing debt:  Miscellaneous costume jewelry, rings, neclaces	<ul> <li>■ Retain the property and enter into a Reaffirmation Agreement.</li> <li>□ Retain the property and [explain]:</li> </ul>	■ Yes	
Creditor's Wells Fargo Home Mortgage name:	■ Surrender the property.  ☐ Retain the property and redeem it. ☐ Retain the property and enter into a	■ No □ Yes	
Description of property securing debt:  2314 Windsor Ln Country Club Hills, IL 60478 Cook County in foreclosure, surrender value from Zillow.com	Reaffirmation Agreement.  Retain the property and [explain]:		
Part 2: List Your Unexpired Personal Property Leases			
For any unexpired personal property lease that you listed in the information below. Do not list real estate leases. Un You may assume an unexpired personal property lease if	expired leases are leases that are still in effec	t; the lease period has not yet ended.	
Describe your unexpired personal property leases		Will the lease be assumed?	
Lessor's name: Description of leased Property:		□ No □ Yes	
Lessor's name: Description of leased Property:		□ No	
Topony.		☐ Yes	
Lessor's name: Description of leased		□ No	
Property:		☐ Yes	
Lessor's name: Description of leased		□ No	
Property:		☐ Yes	
Lessor's name: Description of leased		□ No	
Property:		☐ Yes	
Lessor's name:		□ No	
Description of leased Property:		☐ Yes	
Lessor's name:		□ No	
Description of leased Property:		☐ Yes	
Part 3: Sign Below			

Official Form 108

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Deb	tor 1	Earlene Bibbs-Hayden	Case number (if known)
	•	lty of perjury, I declare that I have indi at is subject to an unexpired lease.	icated my intention about any property of my estate that secures a debt and any personal
X	/s/ Ea	rlene Bibbs-Hayden	X
	Earle	ne Bibbs-Hayden	Signature of Debtor 2
	Signat	ure of Debtor 1	
	Date	June 17, 2016	Date

## Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.</a>

### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-19952 Doc 1 Filed 06/17/16 Entered 06/17/16 16:01:44 Desc Main Document Page 64 of 72

B2030 (Form 2030) (12/15)

### **United States Bankruptcy Court** Northern District of Illinois

In re	Earlene Bibbs-Hayden		Case No.		
	·	Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPEN	SATION OF ATTO	DRNEY FOR D	EBTOR(S)	
(	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b compensation paid to me within one year before the filing per rendered on behalf of the debtor(s) in contemplation of	of the petition in bankrupto	y, or agreed to be paid	to me, for services rende	red or to
	For legal services, I have agreed to accept		\$	1,250.00	
	Prior to the filing of this statement I have received			1,250.00	
	Balance Due			0.00	
2. 7	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed comper	nsation with any other perso	on unless they are men	abers and associates of my	law firm.
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name.  In return for the above-disclosed fee, I have agreed to render	es of the people sharing in the	he compensation is att	ached.	ïrm. A
l	<ul> <li>a. Analysis of the debtor's financial situation, and rendering.</li> <li>b. Preparation and filing of any petition, schedules, statenth Representation of the debtor at the meeting of creditors.</li> <li>d. [Other provisions as needed]</li> <li>Exemption planning;</li> </ul>	nent of affairs and plan whi	ch may be required;		cy;
6. l	By agreement with the debtor(s), the above-disclosed fee of Representation of chapter 7 debtors for a a. Dischargeability actions /adversary act b. Judicial lien avoidances; c. Relief from automatic stay actions; d. Avoidance of liens pursuant to 11 USC e. Secured debt redemption motions; f. Any other adversary proceedings.	ny of the following: ions;			
		CERTIFICATION			
	certify that the foregoing is a complete statement of any ankruptcy proceeding.	agreement or arrangement f	or payment to me for	representation of the debto	or(s) in
Jı	une 17, 2016	/s/ Terrance S.	Leeders		
D	ate	Terrance S. Lee			
		Signature of Attor Leeders & Asso			
		205 W. Randolp			
		Suite 1240			
		Chicago, IL 606 312-346-7400   i	06 Fax: 312-346-7401		

tleeders@leederslaw.com

Name of law firm

### CHAPTER 7 BANKRUPTCY CONTRACT

SECURED DEBTS  1st Mortgage /Arrears  2nd Mortgage /Arrears  Automobile #1  Automobile #2  PMSI  Non-PMSI  Other	UNSECURED DEBTS	NON-DISCHARGEABLE DEBTS Taxes Student Loans Child Support NSF Parking Tickets Overpay Gov't. Debt
TOTAL SOUNDS	TOTAL S	Other
Cosigned debt (Y/N) ~ Wage assignment (Y/N) 722 Redemption (Y/N)	Bank Account Scioff (Y/N) License suspended (Y/N) Motion to avoid lien (Y/N)	Garnishment (Y/N)  IRS Determination (Y/N)  Judgment lien motion (Y/N)

### ALL PAYMENTS ARE TO BE MADE PAYABLE TO "LEEDERS & ASSOCIATES"

THE FEE BELOW DOES NOT INCLUDE FEES FOR MANDATORY CREDIT COUNSELING OR DEBTOR EDUCATION REQUIREMENTS; THIRD PARTY FEES FOR APPRAISALS, CREDIT REPORTS, TAX TRANSCRIPTS, TITLE SEARCHES, AND OTHER REQUIRED DUE DILLIGENCE REQUIREMENTS. FILING FEE IS A SEPARATE FEE FROM THE ATTORNEYS FEES, AND MUST BE PAID BEFORE CASE IS FILED.

S 1250 + \$306.00 court filing fee Flat Fee: \$

THE BANKRUPTCY WILL NOT BE FILED UNTIL ATTORNEYS FEES AND COSTS ARE PAID IN FULL AND ALL REQUIRED DOCUMENTS ARE RECEIVED BY THE ATTORNEYS.

RETAINER: INITIAL RETAINER paid is an ADVANCED PAYMENT RETAINER. This is a present payment to Leeders & Associates in exchange for the commitment to provide legal services in the future. Ownership of this retainer passes to the lawyer immediately upon payment and is deposited in Leeders & Associates business account. However, if the representation ends before the retainer has been exhausted, the retainer is subject to refund under Rules 1.15(b), 1.16(d) and 1.16(d) of the Rules of Professional Conduct. You have the option to place the retainer into a security retainer, and must request this at the time the contract is signed, and this choice is yours alone. The purpose of the advanced payment retainer is to secure sufficient funds out of the reach of seizure in order to hire counsel.

Client Acceptance; initial; 🗶 🖼 🎞

#### CLIENT AND ATTORNEY AGREE TO THE FOLLOWING:

1) FULL DISCLOSURE & PRODUCTION OF DOCUMENTS - Client agrees to fully disclose all financial information to LEEDERS & ASSOCIATES, (hereinafter "LEEDERS") and understands that it is a Federal crime to withhold information from a bankruptcy petition. 2) TIMELY PAYMENT / LAW CHANGES - Client agrees to pay fees in full as soon as possible. Attorney's advice to client is based on current Local, State and Federal laws. Client agrees to hold LEEDERS harmless for damages related to changes in the law that affect client's ability to qualify for bankruptey relief or to discharge debts within a bankruptey case. 3) STATE LAW PROCEEDINGS - Client must personally appear at all state court proceedings. LEEDERS does not represent client in any non-bankruptcy matters in state or federal court, including, but not limited to, divorce proceedings, contempt hearings, citation to discover assets, rules to show cause, or any other civil lawsuits. 4) REFUNDS - If client chooses to terminate LEEDERS representation at any time, chent is only entitled to a refund of unearned fees. LEEDERS' hourly rate is any other GVI awains. 4) REPONDS - If each chooses to terminate Leeders representation at any time, shell is only clinical or ineathed lees. Leeders have reasonable as accounting and issue a refund check of any unearmed attorneys fees paid to date. 5) REAFTRMATIONS & RESCISSIONS - Reaftirmations are not required under the code. Reaffirmations must be filed within 60 days of the date first set for your §341 hearing. Leeders does not guarantee acceptance or filing of the reaffirmation if it poses an undue hardship on client. Client understands creditor must sign and file the reaffirmation, so return with ample time to do so before the deadline. Client may only rescind or cancel a reaffirmation agreement by sending written request by certified mail to LEEDERS no less than 30 after reaffirming the debt. 6) §341 MEETING OF CREDITORS. Client must attend a §341 meeting approximately four weeks after client's case is filed. Client agrees to call LEEDERS to obtain the §341 meeting as settlement is approximately \$500.00 to be paid in advance of settlement. LEEDERS's bowly for for ADVERSARY OBJECTIONS TO DISCHARGE: LEEDERS's fee for negotiating a settlement is approximately \$500.00 to be paid in advance of settlement. LEEDERS's hourly fee for litigating a discharge issue is \$300.00 per hour, ten hours to be paid in advance as retainer.

8) NSF CIIECKS - Client agrees to pay a \$35.00 bounced check fee to LEEDERS for any returned checks not honored by client's bank for any reason.

9) GROUP PRACTICE/ CO-COUNSEL - Client permits all employees of LEEDERS to work on client's case and permits LEEDERS to hire co-counsel or independent attorneys to work on this matter and divide fees with them on the basis of work and responsibility. Client authorizes LEEDERS to have attorneys within the firm, or outside counsel, review client's file to explore other potential causes of action client may have. 10) AUDIT - I understand that the US Trustee may audit my bankruptey file and I agree to cooperate fully with the audit. Lagree to preserve all financial information and documents used to create my bankruptcy petition for 2 years after discharge. 11) CREDIT COUNSELING, Client understands they must complete a pre- and post filing bankruptey course. The pre-filing certificate is valid for 180 days, so case must be filed before expiration or course must be completed again at client's expense. The post-filing certificate must be filed within 45 days after ease filing, so take the post-filing course as soon as possible after filing. If not timely filed, chent's ease may close without a discharge. 13) HOMEOWNER/CONDO ASSESSMENTS. Client understands that all Homeowner Association/Condo association fees are non dischargeable in bankruptcy, and client has a continuing obligation to pay all such charges, even if surrendering property, until property is sold or a foreclosure is completed. 14) GREEN INITIATIVE - LEEDERS will make all attempts to be green. This includes electronic case filing, scanning and destroying of client documents, sending email instead of first class mail. LEEDERS will make client documents available to client for pickup for 90 days after completion of the case, or else LEEDERS can mail them to client for \$20.00. Client documents will be destroyed 90 days after the close of the case, 15) CLIENT CONTACT INFORMATION - Client agrees to keep LEEDERS up to date with valid email address, phone numbers and mailing addresses for the duration of the case.

Possible additional fees not included in fee quote above:

- 1. Amendments: \$230.00 each time. There is no charge to amend for a change of address.
- 2. Missed court date or 341 meeting of creditors: \$200.00 cack.
- 3. Reaffirmations \$100.00 each
- 4. Redemptions \$600.00 each Paid thru the vehicle refinancing.
- 5. Delay: \$150.00 Charge will only incur if 8 months has clapsed without: a chent payment, return of mailed petition, or last request for case information.
- 6. Avoiding Judgment Liens against real estate \$450.00
- 7. Avoiding lien on non-purchase money security interests \$400.00
- 8. Motion to reopen a closed bankruptcy case \$600.00 For any motion to reopen a closed bankruptcy case for any reason once the case is discharged. These additional motion fees are to be paid prior to LEEDERS drafting such motion. Client acknowledges that there is a limited time to bring such motions.

Client Signature_	x Earlenetta	Spouse Signature	Date
		1. 8 /2.	6/1
	Attorney Signature X	M Clin	DATE6/9/16

### **United States Bankruptcy Court** Northern District of Illinois

		1 (of the H District of Hillion		
In re	Earlene Bibbs-Hayden		Case No.	
		Debtor(s)	Chapter 7	
	VE	RIFICATION OF CREDITOR M	ATRIX	
		Number of	Creditors:	60
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of credit	ors is true and correct	to the best of my
Date:	June 17, 2016	/s/ Earlene Bibbs-Hayden Earlene Bibbs-Hayden Signature of Debtor		

Advocate Health And Hospitals Corp 2025 Windsor Drive Oak Brook, IL 60523

Advocate Medical Group PO Box 92523 Chicago, IL 60675

Advocate South Suburban Hospital PO BOX 4251 Carol Stream, IL 60197-4251

American Financial Cre 10333 N Meridian St Ste 270 Indianaoplis, IN 46290

ARS 1801 NW 66th Ave Plantation, FL 33313

AT&T PO Box 8212 Aurora, IL 60572-8212

ATG Credit P.O. Box 14895 Chicago, IL 60614

Atg Credit Llc 1700 W Cortland St Ste 2 Chicago, IL 60622

CAB Services 60 Barney Dr. Joliet, IL 60434

Cda/Pontiac Attn:Bankruptcy Po Box 213 Streator, IL 61364 Chase Auto Finance National Bankruptcy Dept 201 N Central Ave Ms Az1-1191 Phoenix, AZ 85004

City of Chicago EMS 33589 Treasury Ctr Chicago, IL 60694

City of Chicago Heights 1601 S. Halsted Chicago Heights, IL 60411

City of Hazelcrest 3000 W. 170th Place Hazel Crest, IL 60429

CMRE Financial Services 3075 E Imperial Hwy Suite 200 Brea, CA 92821

Codilis & Associates P.C. 15W030 Frontage Rd. Suite 100 Burr Ridge, IL 60527

Collect Sys 8 S. Michigan Suite 618 Chicago, IL 60603

Comcast PO Box 3002 Southeastern, PA 19398

Country Club Hills 3700 W. 175th Place Country Club Hills, IL 60478

Country Club Hills Water Dept 4200 183rd St Country Club Hills, IL 60478

Credit Management 4200 International Carrollton, TX 75007

Dish Network Dept. 0063 Palatine, IL 60055

Diversified Collection Services, In P.O. Box 2018 Castro Valley, CA 94546

Enhanced Recovery Company 8014 Bayberry Rd Jacksonville, FL 32256-7412

Global Vacations 6200 Metrowest Blvd Orlando, FL 32835

Harris & Harris Ltd 111 W Jackson Blvd Ste 400 Chicago, IL 60604-4134

Health Care delivery systems 1890 Silver Cross Blvd, Ste 320 New Lenox, IL 60451

IC System
444 Highway 96 East
PO Box 64886
Saint Paul, MN 55164-0086

Illinois Collection Service Agency PO Box 1010 Tinley Park, IL 60477

Illinois Housing Development Author 401 N. Michigan Ave #700 attn Legal Dept. Chicago, IL 60611

Illinois Tollway ATTN: Violation Administration Cent 2700 Ogden Ave. Downers Grove, IL 60515

Jeffrey L. Rosen & Associates 541 Otis Brown Drive Munster, IN 46321

Law Office of Neil J Greene 250 Parkway Drive Suite 160 Lincolnshire, IL 60069

Leroy Hughes 17 W 140th Ct Riverdale, IL 60827

Loyola University Medical Center PO Box 3266 Milwaukee, WI 53201

LVNV Funding POBOX 740281 Houston, TX 77274

MCSI -Municipal Collection Services, Inc 7330 College Dr Suite 108 Palo Heights, IL 60463

Medical Business Bureau PO Box 1219 Park Ridge, IL 60068

Merchants and Med 6324 Taylor Drive Flint, MI 48507

Merchants Credit Guide 223 W. Jackson Chicago, IL 60606

Mercy Medical Group 28231 Network Pl Chicago, IL 60673-1282 Mercy Physician Billing 35072 Eagle Way Chicago, IL 60678-1350

Merrick Bank PO Box 5721 Hicksville, NY 11802-5721

Midland Funding 8875 Aero Dr. Ste 200 San Diego, CA 92123

Midwest Diagnostic Pathology SC 75 Remittance Dr. Ste. 3070 Chicago, IL 60675-3070

MRSI 2250 E Devon #352 Des Plaines, IL 60018

Municipal Collection Service PO Box 666 Lansing, IL 60438

Northwestern Medicine 28155 Network Pl Chicago, IL 60673-1281

Northwestern Memorial Hospital 251 E Huron Chicago, IL 60611-2908

Oak Lawn Radiology Imaging Consult 37241 Eagle Way Chicago, IL 60678-1372

Professional Account Management, LL Collection Services Division P.O. Box 391 Milwaukee, WI 53201-0391

Provincetown Improvement \* 4000 PROVINCETOWN DRIVE Country Club Hills, IL 60478

Radiological Physicians LTD PO Box 2150 Bedford Park, IL 60499

Rdk Collection Service 318 John R Rd # 321 Troy, MI 48083

regional recovery associates 5252 Hohman Po Box 8000 Hammond, IN 46325

Rogers & Hollands 135 S. LaSalle #8019 Chicago, IL 60674

Stellar Recovery 1327 Highway 2 W Suite 100 Kalispell, MT 59901

Tressler Corporate Services 305 W Briarcliff Rd. #201 Bolingbrook, IL 60440

Universal Radiology 9410 Compubill Drive Orland Park, IL 60462

Wells Fargo Home Mortgage 1100 East Woodfield Road Suite 430 Schaumburg, IL 60173